

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

Date Received
Official Use Only



Please type or print in ink.

2013 APR -2 AM 11:49

NAME OF FILER (LAST) Arculeta (FIRST) Bob (MIDDLE) J.

1. Office, Agency, or Court

Agency Name

City of Pico Rivera

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)
☐ Multi-County _____ ☒ County of Los Angeles
☒ City of Pico Rivera ☐ Other _____

3. Type of Statement (Check at least one box)

- ☒ Annual: The period covered is January 1, 2012, through December 31, 2012.
-or-
The period covered is ____/____/____, through December 31, 2012.
☐ Assuming Office: Date assumed ____/____/____
☐ Leaving Office: Date Left ____/____/____
(Check one)
☐ The period covered is January 1, 2012, through the date of leaving office.
☐ The period covered is ____/____/____, through the date of leaving office.
☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

- ☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached
☒ Schedule C - Income, Loans, & Business Positions - schedule attached
☒ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge that the information provided is true and complete.
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/12/13
(month, day, year)

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Realty World Calif. Properties

ADDRESS (Business Address Acceptable)

3124 W. Beverly BL MTB CA 90640

BUSINESS ACTIVITY, IF ANY, OF SOURCE

REAL ESTATE SALES

YOUR BUSINESS POSITION

BROKER

GROSS INCOME RECEIVED

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☒ \$10,001 - \$100,000☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary☐ Spouse's or registered domestic partner's income☐ Loan repayment☐ Partnership☐ Sale of _____

(Real property, car, boat, etc.)

☐ Commission or☐ Rental Income, list each source of \$10,000 or more☐ Other _____

(Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary☐ Spouse's or registered domestic partner's income☐ Loan repayment☐ Partnership☐ Sale of _____

(Real property, car, boat, etc.)

☐ Commission or☐ Rental Income, list each source of \$10,000 or more☐ Other _____

(Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None☐ Personal residence☐ Real Property _____

Street address

City

☐ Guarantor _____☐ Other _____

(Describe)

Comments: _____

FPPC Form 700 (2012/2013) Sch. C
 FPPC Advice Email: advice@fppc.ca.gov
 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE D **Income – Gifts**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

▶ NAME OF SOURCE (Not an Acronym)
ARNOLD GLASMAN
 ADDRESS (Business Address Acceptable)
6615 PASSIONS Blvd Pico Rivera
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
CITY ATTORNEY

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5.11.12</u>	<u>\$7500</u>	<u>DINNER</u>
<u>9.15.12</u>	<u>\$58</u>	<u>DINNER</u>
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
LEBA INC.
 ADDRESS (Business Address Acceptable)
11003 ROCKS RD PICO RIVERA
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
VENUE OPERATOR

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7.3.12</u>	<u>\$120</u>	<u>CONCERT TICKETS</u>
<u>9.16.12</u>	<u>\$120</u>	<u>CONCERT TICKETS</u>
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: _____